



CREDIT CARD AUTHORIZATION FORM

*This form may be used to make a credit card payment to Sequoia Conference Center. Return the completed form to **Sequoia Conference Center, 901 Myrtle Avenue, Eureka, CA 95501.***

*If you prefer, we also accept secure online payments at **sequoiacenter.net/payment***

Name: _____

Program: _____

Event Date: _____ Invoice #: _____

Authorized Payment Amount: _____

Name on Card: _____

Credit Card Number: _____

Exp Date: _____ CVV Code: _____
(Month/Year) (3-Digit Code on back of card)

Billing Address: _____

City, State, ZIP: _____

Email: _____

Phone: _____

I hereby authorize the charge on my credit card with the indicated amount.

Signature: _____

Date: _____